



### Town of Legal

P.O. Box 390  
Legal AB T0G 1L0  
Phone: 780 961 3773  
Fax: 780 961 4133  
www.town.legal.ab.ca

PERMIT STICKER

### The Inspections Group Inc.

12010 111 Avenue  
Edmonton, AB T5G 0E6  
Phone: 780 454 5048 Toll Free: 1 866 554 5048  
Fax: 780 454 5222 Toll Free: 1 866 454 5222  
www.inspectionsgroup.com

## PLUMBING PERMIT APPLICATION FORM

Permit Number: \_\_\_\_\_

Tax Roll Number: \_\_\_\_\_

Application Date(Y/M/D): \_\_\_\_\_

Estimated Completion Date (Y/M/D): \_\_\_\_\_

Permit Type:  Owner  Contractor

Cost of Installation (Labour & Materials) \$ \_\_\_\_\_

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act & Regulations and shall be commenced within 90 days and expires after one year without an extension request.

Owner Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_

#### Owner's Signature / Declaration (Single Family Residential Only)

"I hereby declare I am the owner of the premises in which the work will be conducted, and reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Contractor Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Installer's Number \_\_\_\_\_ Installer's Name \_\_\_\_\_ Installer's Signature \_\_\_\_\_

#### Project Location in The Town of Legal:

Street Address: \_\_\_\_\_  
Legal Subdivision: Part of: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_  
Directions: \_\_\_\_\_

TYPE OF OCCUPANCY	NUMBER OF FIXTURES	WATER AND/OR SEWER SERVICE	PLUMBING DESCRIPTION OF WORK:
<input type="checkbox"/> Residential	Kitchen Sinks _____	<input type="checkbox"/> Disconnect from Septic Connect to Municipal Sewer	_____
<input type="checkbox"/> Farm/Ranch	Basins _____	<input type="checkbox"/> Water and/or Sewer Services	_____
<input type="checkbox"/> Commercial	Showers _____	<input type="checkbox"/> Mobile Home/Factory Assembled Building Connection	_____
<input type="checkbox"/> Industrial	Laundry _____	<b>PRIVATE SEWAGE</b>	_____
<input type="checkbox"/> Oilfield/Gas	Toilets _____	Please use separate private sewage application form	_____
<input type="checkbox"/> Institutional	Washers _____		_____
<input type="checkbox"/> Mobile	Bathtubs _____		_____
<input type="checkbox"/> Manufactured	Floor Drains _____		_____
	Grease Traps _____		_____
	Bidets/Water Fountains _____		_____
	Urinals _____		_____
	Other _____		_____

Payment Type:  Cash  Cheque  C/C Agreement  On File  Interac

Permit Fee: \$ \_\_\_\_\_

+ SCC Levy\* \$ \_\_\_\_\_

Total Cost: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_

\*\$4.50 or 4% of the permit fee maximum \$560.00

#### OFFICE USE ONLY

Issuing Officer's Name: \_\_\_\_\_

Issuing Officer's Signature: \_\_\_\_\_

Designation Number: \_\_\_\_\_

Permit Issue Date: \_\_\_\_\_

The personal information provided as part of this application is collected under Sec. 43 of the Safety Codes Act and Sections 303 and 295 of the Municipal Government Act and in accordance with Section 32.c of the Freedom of Information and Protection of Privacy Act.

Please contact The Inspections Group Inc. via Phone 780 454 5048, Fax 780 454 5222 or online www.inspectionsgroup.com for all inspection requests, allowing two working days notice.